REQUEST FOR CONTINUED EXAMINATION (RCE) **TRANSMITTAL**

Subsection (b) of 35 U.S.C. §132, effective on May 29, 2000, provides for continued examination of an utility or plant application filed on or after June 8, 1995. See The American Inventors Protection Act of 1999 (AIPA).

Filing Date*	January 5, 2004
First Named Inventor	Jiin-Huey Chern LIN, et al
Group Art Unit	1742
Examiner Name	J.R. Roe
Attorney Docket No.	LINJ3054/REF

10/750,755

Application Number

This is a Request for Continued Examination (RCE) under 37 C.F.R. §1.114 of the above-identified application. NOTE: * Filing date must be on or after June 8, 1995; but if before May 29, 2000, then consider a CPA.

 a. The Amendment/Reply filed on (date): June 4, 2007 b. The Information Disclosure Statement (IDS) filed on (date): c. The arguments in the Brief/Reply Brief filed on (date): d. The page(s) of Form PTO-1449 and copy of each listed document filed (date): e. Other: 2. A month Petition for Extension of Time is filed herewith. S. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees required under 37 CFR 1.16 and/or 1.17 to Deposit Account No. 02-0200. 	
 □ c. The arguments in the Brief/Reply Brief filed on (date): □ d. The page(s) of Form PTO-1449 and copy of each listed document filed (date): □ e. Other: □ 2. A month Petition for Extension of Time is filed herewith. ☑ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees 	
 □ d. The page(s) of Form PTO-1449 and copy of each listed document filed (date): □ e. Other: □ 2. A month Petition for Extension of Time is filed herewith. ☑ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees 	
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 ⊠ 3. The Commissioner is authorized to credit any overpayment and charge any deficiency in any fees 	
required under 37 CFR 1.10 and/or 1.17 to Deposit Account No. 02-0200.	
■ 4. A check in the amount of \$395.00 is submitted herewith.	
□ 5. This Request is transmitted by facsimile to number (703)	
□ 6. Other:	
THE RCE FEE IS CALCULATED AS FOLLOWS: Basic Fee: \$790	.00
Total Claims: 20 - 20 (highest number previously paid for) = X \$50 =	
Independent Claims: 6 - 6 (highest number previously paid for) = X \$200 =	
Correspondence Address: Multiple Dependent Claim (add \$360.00):	
Customer Number Subtotal: \$790	.00
50% Reduction if Small Entity Status: (\$395.	00)
Phone: 703-683-0500 Fax: 703-683-1080 ** ** ** ** ** ** ** ** ** ** ** ** **	.00
Date: Name: Signature: Reg. I	٧o.
June 4, 2007 Richard E. Fichter Richard E Ficht 26,3	82

(09Dec04)